

Crisis: Disaster disrupts usual processes and the demand outweighs capacity

CA COVID-19 Academic Credit for Clinical Experiences Tool Kit

<p>Situation</p>	<ul style="list-style-type: none"> • Many existing clinical sites have severely reduced their patient census and are furloughing their own staff. In addition, there is limited PPE which may also contribute to the closure of clinical sites to students. • Students need direct patient care clinical experiences in alternative settings to obtain clinical academic credit to progress to graduation. • California is in a healthcare pandemic related to COVID-19 but not yet in a surge crisis like New York City. • In preparation for a surge crisis, this document provides recommendations to provide students the opportunity for meaningful learning experiences.
<p>Background</p>	<ul style="list-style-type: none"> • NCSBN/NLN/AACN/CCNE/ACEN have provided guidance and recommendations by encouraging academic programs to be creative and flexible in creating new academic-practice partnerships during the COVID-19 crisis.¹ • The Nurse Practice Act (BPC § 2786.6 and 16 CCR §1430) is explicit in that evaluation of the previously acquired knowledge is to be through challenge examination or other methods of evaluation. <ul style="list-style-type: none"> ○ There is no requirement for program faculty evaluation <i>during</i> the acquisition of other knowledge. ○ No concurrent faculty evaluation is required; this would be contrary to the purposes of the statute and regulation, which require that students be afforded an opportunity to gain credit for experiences <i>external</i> to the current program in which they are enrolled. • Academic programs already have existing policies related to BPC§2786.6 and 16 CCR §1430 that should be followed in awarding credit. • Existing direct patient care experiences such as cohorts, preceptorships, and externships/ work-study programs should continue as usual based on availability and are excluded from this SBAR.
<p>Assessment</p>	<ul style="list-style-type: none"> • Direct patient care experiences must allow for a nursing student to function as a student and meeting the course objectives and student learning outcomes is paramount. • There is a wide range of clinical experience possibilities for students to meet course objectives and achieve student learning outcomes. • Creativity and flexibility of the faculty and academic administrators is essential to help the nursing students move towards graduation and enter the workforce. • Faculty and administrators could benefit from a framework to explore new possibilities that are still in alignment with accrediting and regulatory agencies
<p>Recommendation</p>	<ul style="list-style-type: none"> • CACN and COADN have created a framework/worksheet for administrators and faculty to explore opportunities for the purposes of granting academic credit to students in a surge crisis situation.

¹ https://www.ncsbn.org/Policy_Brief_US_Nursing_Leadership_COVID19.pdf

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This framework/worksheet is designed to inspire academic administrators and faculty to think creatively in granting academic credit to students for direct patient care experiences during a COVID-19 surge crisis. This worksheet may be used, ideally, to guide an individual student in thinking through their experience before accepting an assignment or may be used as an evaluation tool when they return from the assignment. This worksheet is not intended for faculty-arranged cohorts, preceptorships, externships/work study, or other faculty-supervised programs. It is intended for direct patient care experiences outside of existing experiences in line with BPC § 2786.6 and 16 CCR §1430. Core tenets of this framework/worksheet are:

- An essential component of granting any academic direct patient care experience credit to students is that the student must be working as a nursing student and meeting course objectives and student learning outcomes.
- Any work that meets course objectives and student learning outcomes is considered an educational experience.

Type of experience	<input type="checkbox"/> Volunteer	<input type="checkbox"/> Paid Responder
Assignment	<input type="checkbox"/> Agency name and address: <input type="checkbox"/> Med/Surg <input type="checkbox"/> Peds <input type="checkbox"/> OB <input type="checkbox"/> Psych/MH <input type="checkbox"/> Geriatric	
Checklist	Factors to Consider in Granting Academic Credit	
	Student Requirements	
	1. Student is enrolled in a BRN approved course in a California approved prelicensure nursing program.	
	2. Student is performing nursing functions beyond the level of a nursing assistant.	
	3. Experiences are in alignment with course description, course objectives, and student learning outcomes.	
	4. A list of skills competencies is provided to the clinical agency.	
	5. The student has appropriate documentation (from either the school or another acceptable form) that validates the clinical learning experience.	
	Clinical Agency & Supervising Clinicians	
	1. Clinical agency agrees to the objectives of the course and provides mentors or preceptors for direct supervision of students.	
	2. The clinical agency and supervising clinicians validate the hours worked and the course objectives/ student learning outcomes were met through appropriate documentation.	
	Academic Institutions	
	1. The course instructor has the final responsibility to evaluate the educational experience, determine the student's mastery of the course objectives, and grant clinical credit.	
	2. How will competency be validated? <input type="checkbox"/> use of challenge examination <input type="checkbox"/> other methods of evaluation, Specify:	
	3. Hours of instruction for the course follow the formula per CCR 1426(g)(2).	
	The regulatory requirement for a nursing program to have an agreement with the clinical agency where the student is practicing has been waived pursuant to the Dept of Consumer Affairs waiver on Nursing Student Clinical Hours. The waived sections are 16 CCR §1427(a) and §1427(c). ²	

² https://www.dca.ca.gov/licensees/clinical_hours.pdf